

CEDAR SPRINGS HEALTH/REHABILITATION CENTER

N27 W5707 LINCOLN BOULEVARD

CEDARBURG 53012 Phone: (262) 376-7676

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 60

Total Licensed Bed Capacity (12/31/03): 60

Number of Residents on 12/31/03: 59

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? No

Average Daily Census: 58

Corporation

Skilled

Yes

Yes

No

58

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		20.3	
Supp. Home Care-Personal Care	No					1 - 4 Years		22.0	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.1	More Than 4 Years		3.4	
Day Services	No	Mental Illness (Org./Psy)	1.7	65 - 74	11.9			-----	
Respite Care	No	Mental Illness (Other)	1.7	75 - 84	33.9			45.8	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.1	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.1	Full-Time Equivalent			
Congregate Meals	No	Cancer	6.8		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	11.9		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	8.5	65 & Over	94.9	-----			
Transportation	No	Cerebrovascular	28.8		-----	RNs		12.0	
Referral Service	No	Diabetes	3.4	Gender	%	LPNs		11.2	
Other Services	Yes	Respiratory	10.2		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	27.1	Male	35.6	Aides, & Orderlies			
Mentally Ill	No		-----	Female	64.4				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	27	100.0	242	0	0.0	0	0	0.0	0	31	100.0	207	0	0.0	0	1	100.0	325	59	100.0	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	27	100.0		0	0.0		0	0.0		31	100.0		0	0.0		1	100.0		59	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	3.3	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	1.7	84.7	13.6	59
Other Nursing Homes	0.9	Dressing	11.9	74.6	13.6	59
Acute Care Hospitals	95.2	Transferring	18.6	69.5	11.9	59
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	15.3	72.9	11.9	59
Rehabilitation Hospitals	0.0	Eating	71.2	16.9	11.9	59
Other Locations	0.6	*****				
Total Number of Admissions	336	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.1	Receiving Respiratory Care		0.0
Private Home/No Home Health	53.9	Occ/Freq. Incontinent of Bladder	22.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.6	Occ/Freq. Incontinent of Bowel	22.0	Receiving Suctioning		0.0
Other Nursing Homes	11.1			Receiving Ostomy Care		1.7
Acute Care Hospitals	9.3	Mobility		Receiving Tube Feeding		5.1
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.4	Receiving Mechanically Altered Diets		27.1
Rehabilitation Hospitals	0.0					
Other Locations	12.9	Skin Care		Other Resident Characteristics		
Deaths	12.3	With Pressure Sores	8.5	Have Advance Directives		45.8
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	334			Receiving Psychoactive Drugs		57.6

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.7	84.7	1.14	88.1	1.10	86.6	1.12	87.4	1.11
Current Residents from In-County	74.6	81.8	0.91	88.7	0.84	84.5	0.88	76.7	0.97
Admissions from In-County, Still Residing	10.1	17.7	0.57	20.6	0.49	20.3	0.50	19.6	0.52
Admissions/Average Daily Census	579.3	178.7	3.24	189.9	3.05	157.3	3.68	141.3	4.10
Discharges/Average Daily Census	575.9	180.9	3.18	189.2	3.04	159.9	3.60	142.5	4.04
Discharges To Private Residence/Average Daily Census	313.8	74.3	4.22	75.8	4.14	60.3	5.21	61.6	5.09
Residents Receiving Skilled Care	100	93.6	1.07	94.9	1.05	93.5	1.07	88.1	1.14
Residents Aged 65 and Older	94.9	84.8	1.12	91.0	1.04	90.8	1.04	87.8	1.08
Title 19 (Medicaid) Funded Residents	0.0	64.1	0.00	48.6	0.00	58.2	0.00	65.9	0.00
Private Pay Funded Residents	52.5	13.4	3.91	30.8	1.70	23.4	2.25	21.0	2.51
Developmentally Disabled Residents	0.0	1.1	0.00	0.4	0.00	0.8	0.00	6.5	0.00
Mentally Ill Residents	3.4	32.2	0.11	31.3	0.11	33.5	0.10	33.6	0.10
General Medical Service Residents	27.1	20.8	1.30	24.1	1.13	21.4	1.27	20.6	1.32
Impaired ADL (Mean)	44.7	51.8	0.86	48.8	0.92	51.8	0.86	49.4	0.91
Psychological Problems	57.6	59.4	0.97	61.9	0.93	60.6	0.95	57.4	1.00
Nursing Care Required (Mean)	5.3	7.4	0.72	6.8	0.78	7.3	0.73	7.3	0.72